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Under the description Reduction Act of 1995, no persons are required to respond to a collection of information unless if displays a valid QMB control number.			
PETITION FOR EXTENSION OF	ΓΙΜΕ UNDER 37 CFR 1.136(a)	Docket 78039	vs a valid OMB control number Number (optional) 6.91551
	In re Application of Ernest Ndzebet		
Application Number 10/020,685			Filed 12/14/2001
	For Oxazoline Surfactant Anode Additive for Alkaline		
	Art Unit Examiner 1745 Gregg Cantelmo		
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.			
The requested extension and appropriate non-small-entity fee are as follows (check time period desired):			
One month (37 CFR 1.17(a)(1))			\$_110
Two months (37 CFR 1.17(a)(2))			\$
☐ Three months (37 CFR 1.17(a)(3))			\$
Four months (37 CFR 1.17(a)(4))			\$
Five months (37 CFR 1.17(a)(4))			\$
` ' ' ''			
Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$			
A check in the amount of the fee is enclosed.			
Payment by credit card. Form PTO-2038 is attached.			
The Director has already been authorized to charge fees in this			
application to a Deposit Account.			
The Director is hereby authorized to charge any fees which may be required,			
or credit any overpayment, to Deposit Account Number17-0055  I have enclosed a duplicate copy of this sheet.			
I am the  applicant/inventor	i una aneet.		
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).			
attorney or agent of record.			
attorney or agent under 37 CFR 1.34(a).			
Registration number if acting under 37 CFR 1.34(a)			
WARNING: Information on this form may become public. Credit card information should not			
be included on this form. Provide	credit card information and authoriza	ation on F	PTO-2038.
December 30, 2003	h. the		
	Jelliet J		
Date	Øigna Warnath I. Rassacion	iture	
608.251.5000	Rennett J. Berson		
Telephone Number	Typed or pr	inted nam	е
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
✓ Total of _1forms are submitted.			

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case.

01/08/2004 CCHRU1 00000202 170055 10020685

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